

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	
1	1						51				
2		1					52				
3		1					53				
4	1						54				
5		1					55				
6	1						56				
7		1					57				
8	1						58				
9	1						59				
10	1						60				
11	1						61				
12	1						62				
13		1					63				
14		1					64				
15		3					65				
16	1						66				
17	1						67				
18	1						68				
19		1					69				
20		1					70				
21		3					71				
22		3					72				
23		2					73				
24		2					74				
25		3					75				
26		3					76				
27		3					77				
28		3					78				
29		3					79				
30		3					80				
31		3					81				
32		3					82				
33		3					83				
34		2					84				
35		2					85				
36		2					86				
37	1						87				
38	1						88				
39		1					89				
40		1					90				
41		1					91				
42		1					92				
43		1					93				
44		1					94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	↓		↓		↓		TOTAL IND.	↓		↓	
TOTAL DEP.	←		←		←		TOTAL DEP.	←		←	
TOTAL CLAIMS	█		█		█		TOTAL CLAIMS	█		█	